UNITED STATES HOUSE OF REPRESENTATIVES 514 CANNON HOUSE OFFICE BUILDING WASHINGTON, DC 20515 (O) 202.225.4276

CONGRESSMAN BRIAN FITZPATRICK ATTN: PETER CHONG 1717 LANGHORNE NEWTOWN RD. SUITE 400 LANGHORNE, PA 19047 (O) 215.579.8102 (F) 215.579.8109



SERVICE ACADEMY CANDIDATE CONGRESSIONAL FILE

FOR CONSIDERATION AND NOMINATION FOR THE US MILITARY SERVICE ACADEMIES:

WESTPOINT		NAVY		AIR FORCE		MERCHANT MARINE	
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If applying to more than one Academy, please indicate your preference order by number.

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	PERSO	NAL INFO	RMATION:			
FULL LEGAL NAME:			DOB:	 		SEX: M / F
HOME ADDRESS:						
CITY, STATE, ZIP:						
PHONE:		SSN:	-	 		-
E-MAIL:						
FATHER'S NAME:						
FATHER'S OCCUPATION:						
MOTHER'S NAME:						
MOTHER'S OCCUPATION:						
PLACE OF BIRTH:						
WILL YOU BE A U.S. C	ITIZEN AT TIME OF ENRO	LLMENT?		Υ /	N	
ARE YOU A RESIDENT OF PENNSYLVANIA 8 TH CONGRESSIONAL DISTRICT?				Υ /	N	
HAVE YOU BEEN CON SERVICE ACADEMIES	TACTED DIRECTLY BY AN?	NY OF THE		Υ /	N	
HAVE YOU APPLIED F YEAR?	OR A NOMINATION IN A P	REVIOUS		Υ /	N	
IF ANSWERED YES	HOW MANY TIMES:		YEAR(S):			

ACADEMIC OVE	RVIEW: Please note Congress	man Fitzpatrick's SAT CODE: 2	2362 and ACT CODE: 7642
(Highest	scores will be taken into cons	ideration for each section if m	ultiple tests taken)
		SAT	
DATE(s) TAKEN			
MATH:			
EVIDENCE-BASED READING & WRITING:			
COMP			
		ACT	
DATE(s) TAKEN			
ENGLISH			
WRITING			
READING			
SCIENCE			
WRITING			
СОМР			

HIGH SCHOOL/COLLEGE ACADEMIC	DATA (MUST BE AN OF	FICIAL COPY)
NAME OF HIGH SCHOOL:		GPA:
CURRENTLY ATTENDING: Y / N	DATE OF GRADUATION:	
SCHOOL ADDRESS:		
CITY, STATE, ZIP:		
SCHOOL PRINCIPAL NAME:		
SCHOOL PRIMARY COUNSELOR NAME:		
SCHOOL POINT OF CONTACT PHONE NUMBER:		
CLASS RANK: OF		
CLASS PERCENTAGE (TOP % OF CLASS):		
NAME OF COLLEGE (IF APPLICABLE):		GPA:
CURRENTLY ATTENDING: Y / N	DATE OF GRADUATION:	
SCHOOL ADDRESS:		
CITY, STATE, ZIP:		
SCHOOL POINT OF CONTACT NAME:		
SCHOOL POINT OF CONTACT PHONE NUMBER:		
MAJOR:		
YEARS ATTENDED:	HOURS COMPLETED:	

^{*}I DECLARE THAT THE INFORMATION PROVIDED AND ANY ATTACHED DOCUMENTS AS NECESSARY IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF*

SERVICE ACADEMY CANDIDATE FILE OF NAME:

PLEASE LIST THREE REFERENCES:

NAME	ADDRESS	CITY, STATE, ZIP	TELEPHONE	REQUESTED

MILITARY SERVICE/EXPERIENCE (INCLUDING JROTC/ CIVIL AIR PATROL):

BRANCH	POSITION	DATES SERVED

PROFICIENT IN FOREIGN LANGUAGE

LANGUAGE	READ (Advanced Intermediate Beginner)	WRITE (Advanced Intermediate Beginner)	LISTEN (Advanced Intermediate Beginner)

ATHLETIC RECORD:

LIST ALL SPORTS, INCLUDE AWARDS AND RECOGNITIONS, AS WELL AS THE GRADES YOU PARTICIPATED	9	10	11	12	College Yr.

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SCHOOL ACTIVITIES:

LIST ALL CLUBS, LEADERSHIP POSITION, AND HONORS, AS WELL AS GRADES YOU PARTICIPATED	9	10	11	12	College Yr.

LIST CIVIC AND COMMUNITY ACTIVITIES, LIST HONORS AND LEADERSHIP, AS WELL AS GRADES YOU PARTICIPATED	9	10	11	12	College Yr.
EAGLE SCOUT	CI	HECK	(IF Y	ES	

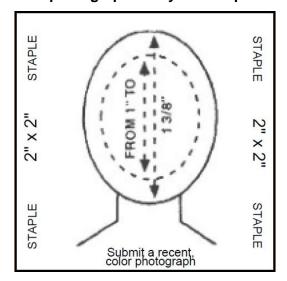
^{*}I DECLARE THAT THE INFORMATION PROVIDED AND ANY ATTACHED DOCUMENTS AS NECESSARY IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF*

HAVE YOU VISITED ANY OF THE SERVICE ACADEMIES OR PARTICIPATED IN ANY SUMMER SEMINARS	9	10	11	12	College Yr.

INDICATE ALL OTHER SOURCES YOU HAVE CONTACTED REGARDING A NOMINATION: YOU SHOULD CONTACT ALL AVAILABLE SOURCES

U.S. SI	TOR ROBERT CASEY			
U.S. SI	TOR PAT TOOMEY			
VICE P	IDENT MIKE PENCE			
PRESI	PRESIDENT DONALD TRUMP			
SECRE	RY OF THE ARMY/NAVY/AIRFORCE			
ОТН				

Please include a photograph with your completed application



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☐ Completed Academy application form.

Congressman Brian Fitzpatrick

United States House of Representatives Pennsylvania's 8th District

Service Academy Checklist

	Resume.	
	Mandatory Essay.	
	Official high school/ college transcript.	
	Three letters of recommendation from non-relatives.	
	Recent photograph of yourself.	
	Established application file with academies of interest.	
	1974: The submission of the requested information constitutes authorization for review of this information tive Brian Fitzpatrick, his staff, his Service Academy Review Board, the Academy Admission Office, and	n
knowledge. I u application che	e Privacy Act Statement. The information provided in this application is true and correct to the best of my understand that in addition to this application. I am also required to submit all of the items on the eck-list. I further understand that Representative Fitzpatrick's Office must be in receipt of all application atter than 4:30 p.m., Friday October 26, 2018.	
Signature:	Date:	
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